

Hawaii Dept. of Health, Office of Health Care Assurance

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 125058	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 11/03/2021
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NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE

YUKIO OKUTSU STATE VETERANS HOME **1180 WAIANUENUE AVENUE**
HILO, HI 96720

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
4 000	Initial Comments A re-licensure survey was conducted by the Office of Health Care Assurance on November 3, 2021. The re-licensure survey was conducted in conjunction with the recertification survey by Healthcare Management Solutions, LLC on behalf of the Hawaii Department of Health, Office of Health Care Assurance on October 28, 2021. The facility was found not to meet the regulatory requirements for Hawaii Administrative Rules, Title 11, Chapter 94.1, Nursing Facilities.	4 000		
4 123	11-94.1-27(12) Resident rights and facility practices Written policies regarding the rights and responsibilities of residents during the resident's stay in the facility shall be established and shall be made available to the resident, resident family, legal guardian, surrogate, sponsoring agency or representative payee, and the public upon request. A facility must protect and promote the rights of each resident, including: (12) The right to be fully informed in advance about care and treatment and of any changes in that care and treatment and the right to participate in planning care and treatment, unless adjudged incompetent or incapacitated; This Statute is not met as evidenced by: Based on interview and record review, the facility failed to ensure the resident and/or the resident's representative was informed and provided the opportunity to consent or decline changes in diagnosis and dosage of an antipsychotic medication for one of three (Residents (R)10) reviewed for antipsychotic use in a total sample of	4 123	CORRECTIVE ACTION OF RESIDENT IDENTIFIED: Resident 10 updated consent obtained on 10/27/21 for anti-psychotic medication. IDENTIFYING OTHER RESIDENTS	11/30/21

Office of Health Care Assurance
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Electronically Signed

11/11/21

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4 123	<p>Continued From page 1</p> <p>15 residents.</p> <p>Findings include:</p> <p>A review of R10's "Admission Record" located in the "Electronic Medical Record (EMR)" under the "Profile" tab, revealed the resident was admitted to the facility on 06/09/21 with diagnoses that included Alzheimer's disease.</p> <p>The facility provided document titled, "Anti-Psychotic Medication Informed Consent," revealed R10 consented, as evidenced by his signature, on 06/09/21 to receive Seroquel (type of antipsychotic medication) 50 milligrams (mg) extended release (XR) every night at bedtime for "Dementia with Behaviors" related to Alzheimer's Disease.</p> <p>Review of R10's admission "Minimum Data Set (MDS)" with an Assessment Reference Date (ARD) of 06/14/21 revealed R10 received an antipsychotic medication on six out of seven days during the assessment review period. Review of R10's quarterly "MDS" with an ARD of 07/20/21 revealed he received an antipsychotic medication on seven of seven days during the assessment review period.</p> <p>The "Antipsychotic Use Assessment," dated 07/21/21, located in the "Assessments" tab of the EMR revealed a summary of "Behavioral Trends and Antipsychotic Usage." The summary showed R10 received his medication at night, and he woke up later in the morning, close to lunchtime. R10's expressions of behaviors were mostly resistive to care. The committee recommended that the physician change R10's Seroquel from 50 mg XR nightly to 25 mg instant release (IR) nightly for "difficulty sleeping" (not for Dementia</p>	4 123	<p>HAVING THE POTENTIAL TO BE AFFECTED, AND WHAT CORRECTIVE ACTION WILL BE TAKEN:</p> <p>All residents have the potential to be affected by this deficiency.</p> <p>Audit completed of current residents on anti-psychotic medication to ensure that the resident and/or representative was informed and provided the opportunity to consent or decline changes in diagnosis and dosage of any anti-psychotic medication.</p> <p>Director of Nursing and/or Designee will be responsible for ongoing compliance.</p> <p>MEASURE AND SYSTEMATIC CHANGES TO PREVENT RECURRENCE:</p> <p>License Nurse will obtain consent when order is received for any anti-psychotic medication.</p> <p>Medication orders involving anti-psychotic medication will be monitored daily in Clinical Meeting x 90 days.</p> <p>License nursing staff education initiated on notifying resident and/or resident representative for any changes in diagnosis and dosage of anti-psychotic medication requiring new consents as per F552 §483.10 (c) (1) (4)-(5) and will be completed by November 30, 2021.</p> <p>License nursing staff education initiated on Yukio Okutsu State Veterans Home</p>	

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4 123	<p>Continued From page 2</p> <p>with Behaviors). The form did not indicate staff notified and obtained consent from the resident and/or their representative regarding these changes.</p> <p>A review of the EMR lacked evidence that a new consent was signed by the resident, or his representative related to the change in medication dosage and diagnosis per the "Antipsychotic Use Assessment" completed on 07/21/21.</p> <p>A review of the July, August, September, and October 2021 "Medication Administration Record," located in the "Orders" tab of the EMR showed the resident received Seroquel 25 mg IR every night for "difficulty sleeping."</p> <p>In an interview on 10/28/21 at 9:27 AM, Director of Nursing (DON) confirmed that the resident's representative had not signed a new consent form related to the change in dosage and diagnosis for the use of an antipsychotic medication. The DON further stated that she had reviewed the EMR and despite the psychiatrist having written the note changing the diagnosis to difficulty sleeping, the assessment form continued to list the diagnosis of dementia with behaviors and did not know how it was missed.</p> <p>A facility policy titled, "Informed Consent," revised 02/2021, revealed that " ...Every patient (or personal representative) has the right to participate in an informed consent discussion. In order to provide informed consent, the patient must understand the nature and proposed medical/surgical treatment or procedure, the risks, the benefits, the alternative, and the consequences of forgoing the proposed medical/surgical treatment or procedure in a</p>	4 123	<p>"Pharmacy Services Unnecessary Drugs" policy and procedure and will be completed by November 30, 2021.</p> <p>License Nurse Meeting held on 10/29/21 to review CMS Survey findings to include regulatory requirement for obtaining new consents when dosage and indication of use is changed for anti-psychotic medications.</p> <p>MONITORING CORRECTIVE ACTION FOR SUSTAINED CORRECTIONS:</p> <p>Director of Nursing and/or Designee will track and monitor compliance based on the daily review of anti-psychotic medication orders x 90 days.</p> <p>Director of Nursing and/or Designee will submit findings to QAPI meeting x 90 days.</p>	

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4 123	Continued From page 3 language and at a level the patient can understand ...The informed consent discussion includes, but not limited to: the nature of the proposed care ...potential benefits, risks, side effects or problems ..."	4 123		